



Commonwealth
of Massachusetts

Center for Health
Information and Analysis

All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: CHIA-APCD@state.ma.us.

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

Celticare of Massachusetts														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	28	28
PR	2011	0	0	28	0	28	28	0	0	28	0	0	28	140
PR	2012	0	0	30	0	30	30	0	0	29				119
ME	2009	0	0	0	0	0	0	0	0	0	0	0	84,099	84099
ME	2010	0	0	0	0	0	0	0	0	0	0	0	183,423	183423
ME	2011	84,182	77,983	74,218	72,622	71,828	71,423	40,516	39,920	39,648	40,014	39,688	39,979	692,021
ME	2012	40,882	40,665	40,910	42,173	46,052	46,950	38,804	38,804	35,000	35,000			405,240
PV	2011	72,342	72,342	72,342	72,342	72,342	72,342	52,496	53,618	62,816	54,729	65,866	67,162	790,739
PV	2012	67,963	69,357	70,509	72,234	77,957	77,746	76,813	75,466	68,798	68,798			725,641
MC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2009	0	0	0	0	0	0	93,386	186	340	668	1,914	19,136	115630
MC	2010	32,013	48,658	64,996	58,049	46,861	69,186	69,077	66,803	78,618	90,476	58,551	94,471	777,759
MC	2011	72,732	81,143	72,609	95,177	74,447	69,629	83,217	79,998	98,131	78,384	85,233	87,044	977,744
MC	2012	78,998	88,924	123,238	95,707	102,014	129,236	99,443	107,158					824,718
PC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2009	0	0	0	0	0	0	191	317	355	8,585	16,925	22,383	48756
PC	2010	22,869	22,863	27,429	26,572	26,690	28,902	31,260	33,207	35,049	38,227	39,378	38,979	371,425
PC	2011	39,137	36,928	42,703	40,067	41,690	41,977	43,920	48,875	48,226	50,567	50,055	51,476	535,621
PC	2012	54,158	53,698	56,266	55,501	62,878	62,069	51,833	48,039	41,643	42,125			528,210
DC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2009	0	0	0	0	0	0	0	9	25	21	2	21	78
DC	2010	20	88	48	94	181	349	346	208	331	183	258	221	2327
DC	2011	207	295	352	279	277	303	288	621	620	723	1,006	797	5768
DC	2012	808	1,523	1,483	2,062	2,761	2,775	2,418	2,898	1,868	2,438			21034

***Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.











